

REPLACE WITH YOUR HEADER

DEXFORM.com

Human Resources

## PATERNITY LEAVE APPLICATION FORM

EMPLOYEE DETAILS	
NAME:	
SCHOOL/UNIT/RESIDENCE:	
PERIOD OF PATERNITY LEAVE	
<b>Amount of leave requested (No of Weeks):</b> (maximum 2 weeks subject to conditions – see Paternity Leave Policy - Leave can be taken at any period from the day the baby is born or placed (adoption) up to 8 weeks from that date and in a block of 2 weeks or 2 separate blocks of 1 week)	
Starting on:	Ending on:
Name of child I am requesting Paternity Leave for: (if name not known, write ‘baby – surname’)	
Date of Birth of Child/Adoption Date: (you may be asked to provide evidence i.e. birth certificate or adoption certificate)	
DECLARATION	
<b>As there is a statutory element involved in paternity pay we are required to ask you to sign the following declaration:</b>	
I declare that	
<ul style="list-style-type: none"><li>I am<ul style="list-style-type: none"><li>the baby’s biological father, or</li><li>married to the mother, or</li><li>living with the mother in an enduring family relationship, but am not an immediate relative <input type="checkbox"/></li></ul></li><li>I have responsibility for the child’s upbringing <input type="checkbox"/></li><li>I will take time off work to support the mother or care for the child <input type="checkbox"/></li></ul>	
SIGNED:	DATE:
HEAD OF SCHOOL/UNIT AUTHORISATION	
Approved / Postponed	
If leave has been postponed please detail reason and also confirm new dates of when leave will be taken:	
SIGNED:	DATE:

**Completed forms should be returned to Human Resources. A copy should be kept for yourself and your Head of School/Unit.**